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Division of Corporations

Fax Number : (850)205-0381

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number: I20000000257 Phone : (850)224-8870 Fax Number : (850)224-7047

FLORIDA PROFIT/NON PROFIT CORPORATION

LJS Holdings, Inc.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION OF

LJS Holdings, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is LJS Holdings, Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 7 La Terraza, Lakeland, Florida 33813

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is twenty (20) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Lana Swartzwelder, 7 La Terraza, Lakeland, FL 33813

ARTICLE V: OFFICER & DIRECTOR

The name and address of the initial Officer and Director of the corporation is: Lana Swartzwelder, President, 7 La Terraza, Lakeland, Florida 33813

ARTICLE VI: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL. 32301.

The undersigned has executed these Articles of Incorporation this 13th day of March 2007.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"

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SECHETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation,

· NC.
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HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ASSOCIATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE. TEERSBY ACCEPT THE APPOINTMENT AS BEGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Sma Jwartwelder